# This form is also available online at <a href="http://www.ci.waukesha.wi.us/dept/building/FORMS.htm">http://www.ci.waukesha.wi.us/dept/building/FORMS.htm</a> CITY OF WAUKESHA \* 201 DELAFIELD ST., Room 200 \* WAUKESHA, WI 53188 \* (262) 524-3530

DEPARTMENT OF COMMUNITY DEVELOPMENT - BUILDING INSPECTION

PERMIT NUMBER

## APPLICATION FOR BUILDING PERMIT

### Job Address: \_\_\_\_\_\_Today's Date:

The undersigned hereby applies for a permit to do work herein described according to the plans and specifications filed herewith. The undersigned agrees that such work will be done in accordance with the said descriptions, plans and specifications in compliance with the building, zoning and health ordinances and all other ordinances of the City of Waukesha and with all laws and orders of the state of Wisconsin applicable to said premises.

The undersigned further applies for a permit to occupy the premises described herein for the uses and purposes as herein set forth and in strict accordance with all the provisions of the City of Waukesha zoning and health ordinances and all other ordinances of the City of Waukesha and State of Wisconsin applicable to said premises.

Contracting Company		Dwelling Contractor Certification #				Exp Date	
Contractor's Name:		Dwelling Contractor Qualifier #				Exp Date	
Address			City		State	Zip	
Telephone #	Fax #						
Owner			Telephone				
Address				Do you hav	e a Well or S	eptic? Yes	No
City			State	Zip _			
Check one:	☐Single-Family	Duplex	☐Multi-Family	□Comme	rcial		
IMPORTANT Check one:	☐New Building	Alteration	□Repair	Addition	n	ssory Bldg	
Square Foot	age of area bein	g Added or Alt	tered				
Proposed Project:				Estim	ated Cost \$		
,							
		Licensed F	Plumbing Cor		_		
Licensed Electrical Contractor							
				Designer / Ex	nginoor		_
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#### ADDITIONAL INFORMATION

#### **RESIDENTIAL** (includes 1 & 2 Family)

If the project is attached to the Residence, Contractor must have the following:

#### 1. DWELLING CONTRACTOR CERTIFICATION

Issued by the State to insure the contractor complies with:

- a. Worker's compensation requirements.
- b. Unemployment compensation requirements
- c. Liability or bond insurance requirements.

#### 2. DWELLING CONTRACTOR QUALIFIER

Issued by the State after the contractor has completed 12 hours of approved training and has passed an exam.

### **SUPERVISING PROFESSIONAL**

A supervisory professional is required (refer to SPS.361.40 of the Wisconsin Commercial Building Code) for projects involving repair, alteration, or additions to existing buildings where volume of the building is 50,000 cubic feet or more.

#### **DESIGN PROFESSIONAL**

Construction documents (plans, specifications, etc.) being submitted for permit approval must be prepared, signed, and sealed in accordance with Chapter 443. Stats and s. A-E 2.02 when the total volume of the building is 50,000 cubic feet or more.

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